THE

LOUISVILLE MEDICAL NEWS.

"NEC TENUI PENNÂ."

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Original.

SORE THROAT AND ALBUMINURIA.

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CASE I: Mrs. M.A., aged twenty-five, married two months, of a healthy constitution, with no history of any previous sickness, called at my office on account of a severe back-ache. A few days ago she got wet in a cold rain, and had become thoroughly chilled. This was followed by a cold and a sore throat. Her appetite is not good, but her bowels are regular and she has no fever. The throat is better. She complains of burning while urinating, and the urine looks smoky. She brought some of her urine with her, and on examining the specimen I found considerable albumen present. Pressure over the back caused no increase of pain. I ordered her to wear on her back a mustard plaster made up with molasses, as recommended by Prof. Tyson†, and gave her the following prescription:

Bromide of potassium,	℥j;
Acetate of potassium,	℥j;
Fl. ext. jaborandi,	f.℥j;
Water,	f.℥v.

M. Sig: A teaspoonful in a half glass of fresh water every four or five hours.

Her diet was to consist of skimmed milk, coffee, and toasted bread.

I sent a specimen of the urine for microscopical examination to Prof. Knapp, of Evansville, who reports as follows: "The specimen of urine from the woman contained vibriones, a large number of granular cells, either changed renal epithelium or pus cells, or probably both, large granular casts and epithelium from the bladder and vagina. The specimen also contained an abundance of ammonio-magnesium phosphate crystals and granular matter, but no hyaline casts. The examination of the specimen was rather unsatisfactory, on account of the advanced state of putrefaction and impossibility of getting a good sediment. Please to put some antiseptic (salicylic acid) into the next specimen you send me."

On the third day of the commencement of the treatment I was called to see the patient. She had faithfully carried out the treatment, and it had made her a good deal worse as she expressed it. She complained of nausea, diarrhea, headache, and that her menses had also appeared. She did not think herself pregnant. The back-ache was not so severe as it had been, and the urine did not burn her so much. I gave her some paregoric and catechu for the diarrhea and nausea, and ordered a continuation of the former treatment. On the eighth day she considered herself cured, although there was still a trace of albumen present in her urine.

It is now about ten months since she has used any medicine except a porous plaster to her back. From the pale and dry condition of her skin, I take her to be a volcano of mischief, with dangerous possibilities when she becomes pregnant or gets her next cold.

CASE II: A boy, ten years of age, complained of pain in the neck and pain in his throat. On examining the throat, I found a congestion, the commencement of an inflammation. I prescribed a gargle of chlorate of potassium and a Dover's powder.

About ten days afterward, the boy had recovered from his first slight complaint, and had a good appetite, and was otherwise well, except that the parents thought the patient's skin looked dry, pale, and puffed. But no anxiety was caused by this until the patient became affected with general dropsy, or anasarca. The entire body was dropsical, especially the eyelids, the cheeks, the

*Read to the DuBois County, Indiana, Medical Society.

†Louisville Medical Herald, December, 1882.

abdomen, the scrotum, and the foreskin of the penis. The patient complained of a dull back-ache, some nausea, a dull headache and the skin was dry. The boy was pale and had a stupid look, the conjunctiva was white, and the tongue coated with a yellowish white fur. The urine was heavily loaded with albumen and was cloudy and smoky. I prescribed the following medicines:

℞ Bromide of potassium, ... ℥ss;
Acetate of potassium, ... ℥ss;
Fl. ext. jaborandi, ... f.℥ss;
Water, ... f.℥ivss.
M. Sig: A teaspoonful three times a day in fresh water.

A mustard plaster was ordered to be placed to the back, the patient was to stay in bed, and was to live on skimmed milk.

A specimen of the urine was sent to Prof. Knapp for microscopical examination. He reported: "In the specimen from the ten-year-old boy, I found, besides an immense number of bacteria, renal epithelium, large scaly epithelial cells, either from the bladder or the urethra, a few red blood discs, large epithelial and granular casts and hyaline casts. The urine was also in a state of decomposition, so that no doubt the anatomical elements had undergone partial disintegration."

In twelve days after the treatment was commenced the boy was convalescent, and at the time of writing this article is entirely well. The presence of albumen in the urine disappeared, and as to the microscopical appearances I can not report, as I have no microscope.*

Comments: The following remarks induced me to report the above two cases of albuminuria following sore throat. "Dr. Laure (*Deutsch. Med Zeit.*) has published a series of cases of sore throat complicated by albuminuria. Such observations have recently also been made by the great clinician Leyden, who noted nephritic disturbances and even paralysis following simple sore throat where diphtheritic patches had not been present. Laure supposes that in his cases there existed a catarrhal co-affection of the kidney-epithelium. It follows that we should pay attention to the kidneys even in the simplest case of sore throat."†

This teaching is fallacious. As in the past so in the future, of a thousand cases of colds, of catarrhs of the mucous membrane of the body, some will be in the throat, others in the bronchi, etc. Of these thousand cases a percentage will end in chronic catarrh of the nose, bronchial tubes, stomach, or kidneys; a percentage will end in consumption, a percentage may end in some other disease, and the majority will get well. Otherwise, every person in the United States would have albuminuria once or twice each winter. It follows, therefore, that we should not pay attention to the kidneys in the "simplest sore throat," unless some symptom calls our attention to them. And if a symptom calls our attention to kidney trouble with sore throat, then we have nothing more than a catarrh of the kidney-epithelium and a catarrh of the mucous membrane of the throat occurring together, as they may do. The one does not, however, cause the other; they merely occur together.

Roberts says* "that acute catarrhal nephritis is essentially a catarrh of the uriniferous tubes, with enormously increased epithelial growth. The first step in the morbid process is an inflammatory congestion of the organs with rapid swelling and more or less extensive ruptures of the capillaries, especially those of the Malpighian tufts; then increased production of epithelial cells, packing up and distending the tubules, and thereby compressing and impeding the circulation through the capillaries. The depurating functions of the organs are thus necessarily impeded, and the blood is poisoned with excrementitious matter; the urine becomes scanty and deficient in its proper constituents, and as it percolates through the diseased ducts it detaches whole tracts of their epithelial lining, or carries with it loose epithelium, blood, and fibrinous exudation, which forms the grumous sediment seen in the urine in these cases."

This definition of acute catarrhal nephritis, or acute desquamative, or tubal, or diffuse nephritis, implies that the disease is a catarrh of the kidney, similar to the same condition in the lung.

A catarrh of the lung may have many sequels, consumption being the most frequent; so may an acute catarrh of the kidney become chronic or change into some other disease. But it is essentially a catarrh caused by cold, by intoxicating liquors, and by such other irritants as cause catarrhs in other parts of the body.

It becomes apparent, therefore, that a case of acute catarrhal nephritis should be treated as a catarrh, having its seat in the

*For rules for the examination of the urine by Formad, see page 307, vol. xiv, of the Louisville Medical News.
†Med. and Surg. Reporter, page 135, August 4, 1883.
*Reynolds's System of Medicine, vol. iii, page 652.

kidneys. The diet and drink should be regulated, and should consist principally of skimmed milk, butter-milk, mucilaginous drinks, and soups, such as barley-water, etc. As medicines the potassium salts, jaborandi, iron, and digitalis (the last if anasarca occurs) are highly recommended and merit a trial. Other remedies may be indicated by different symptoms occurring in different cases. Above all, rest of both body and mind, and warm flannel clothing next to the skin, should be secured. Baths to make the skin act are also indicated.

FERDINAND, IND.

Miscellany.

THE AIMS OF THERAPEUTICS.—At the Congress of German Naturalists and Physicians, held last month at Freiburg, Prof. Liebermeister delivered an address upon the aims of modern therapeutics. (Lancet.) He said that owing to the "epoch-making" discoveries upon the nature of disease which have been made within the last decade, great changes were taking place in treatment, which had by no means yet attained their full development. Although theoretically therapeusis is based upon pathology, advances in pathology had not always been followed by a similar advance in therapeutics, and he instanced the fact of the marked transition from the old symptomatological system of medicine to that based upon pathological anatomy which occurred early in the century, as leading to no corresponding change in methods of treatment. But as anatomical study increased and physical diagnosis improved, a period of skepticism with regard to the influence of remedies and expectant treatment came into vogue. Regarded by some as a retrogression, this was really a great advance in therapeutics. It was not only the liberation from the dogmatism of the schools and systems, but the opening up of a scientific study of the object. Then it came about that the anatomical standpoint yielded to the etiological the recognition of the important part played by micro-organisms in many diseases being the cause of this change. The doctrine of contagium vivum, strenuously disputed twenty years ago, has practically become generally accepted, and prophylaxis is now the first aim in dealing with disease. He pointed out how the pathogenetic organisms may be considered in two great classes — those, namely, which prevail every where, and those which require special conditions for their occurrence. In this way he contrasted the poison of pyemia, septicemia, osteomyelitis, etc., on the one hand, with those of malaria, cholera, typhus, scarlet fever, and other endemic and epidemic diseases on the other. Measures of prophylaxis were identical with general sanitation and public and personal hygiene. He strongly insisted upon quarantine as protective against the spread of epidemics, and rebuked England for allowing, in the face of the cholera, its mercantile interests to render it blind to the interest of the public welfare of the whole of Europe. When the infective germs have gained entrance into the body, then specific treatment is called for, as quinine in malaria, calomel in typhoid fever, salicylate of soda in rheumatism. Further, there are measures for direct prophylaxis, as in curing a susceptibility to catarrhs, which afford so favorable a soil for the tubercle bacillus. Other methods are symptomatic and alterative; and, although therapeusis is still largely empirical, the path along which it must advance has been much cleared by the advance of general medical knowledge, so that there was much to hope for in the future.

DANGER FROM FLIES.—Dr. Grassi is said to have made an important, and by no means pleasant, discovery, in regard to flies. (British Medical Journal.) It was always recognized that these insects might carry the germs of infection on their wings or feet, but it was not known that they were capable of taking in at the mouth such objects as the ova of various worms, and of discharging them again unchanged in their feces. This point has now been established, and several striking experiments illustrate it. Dr. Grassi exposed in his laboratory a plate containing a great number of the eggs of a human parasite, the *tricocephalus dispar*. Some sheets of white paper were placed in the kitchen, which stands about ten meters from the laboratory. After some hours, the usual little spots produced by the feces of flies were found on the paper. These spots, when examined by the microscope, were found to contain some of the eggs of the tricocephalus. Some of the flies themselves were then caught, and their intestines presented large numbers of the ova. Similar experiments with the ova of the *oxyuris vermicularis* and of the *tenia solium* afforded corresponding results. Shortly after the

flies had some moldy cream, the *oïdium lactis* was found in their feces. Dr. Grassi mentions an innocuous and yet conclusive experiment that every one can try. Sprinkle a little lycopodium on sweetened water, and afterward examine the feces and the intestines of the flies; numerous spores will be found. As flies are by no means particular in choosing either a place to feed or a place to defecate, often selecting meat or food for the purpose, a somewhat alarming vision of possible consequences is raised. Dr. Grassi invites the attention of naturalists to the subject, and hopes that some effectual means of destroying flies may be discovered.

Dr. Holmes's Advice to a Young Physician.—Dr. Holmes, some years ago, wrote as follows to a young man who requested his advice about becoming a doctor (The Medical Record): "My dear young friend—To be a physician the following requisities, if not absolutely necessary, are very desirable: First, a sound constitution. The wear and tear are very great, and cares, broken rest, irregular meals, and exposure of all kinds demand great stamina. Second, an unselfish nature. You must always think of your patient's welfare, not of your own comfort or habits. Third, you must be content to wait a long time before you establish a paying reputation. Fourth, much of your work being distasteful, wearisome, wearing to the body, and almost fruitless to the mind, you must gradually harden yourself to the routine, and for this you ought to have an easy and accommodating temper. Fifth, you must be in constant familiarity with suffering of all kinds, which must either make your feelings tough, or keep you in distress. Medicine is very exacting. I don't believe much in literary doctors. I would not have one that was in the habit of scribbling verse, or stories, or any thing of the kind."

The Prophylactic Uses of Cats.—Dr. F. Bradnack, of New York, sends the following history to the Medical Record: On Eighty-sixth Street a young woman left her infant, of sixteen months, upon a pillow by an open window. She had not been gone three minutes before the child fell out of the window and struck upon a stone pavement twelve feet below. I found the back badly contused. Expecting to find the skull fractured, I made a minute and careful exploration, but to my astonishment, there was neither cranial fracture nor displacement, not even a scalp abrasion. Puzzled at this, I asked if any one had seen the child fall. An intelligent man deposed as follows: "The reason why the child's head was not smashed is that under the window from which it fell there lay a large tom-cat. The head of the child struck squarely on the belly of the cat. The next day the child was doing well, and the cat was sitting on the hearth, and also doing as well as could be expected under the circumstances.

Bacteria not the Cause of Disease.—At a meeting of the Buffalo Microscopical Club on the 12th ultimo, Dr. Rollin Gregg read a paper, in which he contended that the so-called bacteria of disease were nothing more than so many forms of fibrine. He has made some apparently rather rough-and-ready experiments by boiling blood on the one hand, and allowing it to "rot" on the other. All the forms that have ever been pictured as bacteria, were to be observed in the boiled blood. "Rotted" blood showed even still more numerous shapes. In fact, every variety of shape, from a thread to a ring or globe, or any combination of such forms, may be simulated more or less exactly by fibrine in "rotting" blood. Dr. Gregg seems to think that fibrine contained most, if not all, of the formative forces of the organic world.

Newspaper discussions of social difficulties are not always productive of unmixed good. A patient is now under treatment in a principal London hospital, suffering from melancholia, whose state has been mainly induced after reading the Daily Telegraph's correspondence on "Our Boys." This youth had been a clerk in a city house, but was temporarily disengaged, and during his forced idleness at home the numerous letters appearing in our daily contemporay came under his notice. They caused him to lose all hope of obtaining further employment, and this, preying on his mind, led to disturbance of his mental balance, the result being he is now almost hopelessly melancholic and suicidal.—*Medical Press.*

Enteric Fever.—Mr. John Coveney, M. R.C.S., writes to the Lancet: I have at the present time under my care three cases of enteric fever in the same family. Two of these, boys, aged respectively nine and two, commenced their attack with otorrhea.

DOCTORS CONSIDERED AS COMMISSION AGENTS.—We have received from several correspondents a circular offering the medical profession a commission of ten per cent on orders for patent collars and baby linen. Hitherto undertakers have been the only class of tradesmen, who, with a sort of grim humor, have thus tempted the members of a somewhat non-lucrative profession. Now it is proposed that we should co-operate with milliners and dressmakers; what next? We shall not advertise the lady who designs this questionable honor for the profession, lest in so doing we advertised her wares, which should be avoided.—*Lancet.*

HYDROBROMIC ACID AS A SUBSTITUTE FOR THE BROMIDES.—At a meeting of the American Neurological Association (New York Medical Journal) Dr. Dana said the dose of pure acid should be from ten to twenty drops; of the officinal, one to two and a half drams. He employs it in the following conditions: Epilepsy, alcoholism, various forms of headache, vertigo, general nervous depression, neurasthenia, chorea, insomnia, hysteria, post-hemiplegic disturbances, etc. He has seen the greatest benefit from the drug in epilepsy, in post-hemiplegic difficulties, and in other lighter general nervous troubles. In the doses in which it is usually perscribed, the doctor says it will not prevent cinchonism. Hydrobromic acid was recommended in preference to haloids, because it was agreeable to take, non-irritating, and did not produce an eruption or bromism.

THE PRESERVATION OF BODIES.—Dr. J. Polak, of Warsaw, has for some time past been employing an aqueous solution of sublimate for the preservation of cadavers. It is used in the proportion of 1 to 500, or 1 to 300. He claims that better results are obtained from the employment of this salt of mercury than from thymol as ordinarily used, that is, thymol 3 parts, glycerine 2,000, and water 1,000; and that being at the same time much cheaper, it is to be preferred. The injections are made in the ordinary way, through the carotid or femoral artery, and special appliance is needed.

THE PROSTATE.—The importance of the prostate gland as a disturbing element in certain states of young people as well as old is one of the most commonly recognized facts of clinical observation. There is not, however, any very ready means accessible either of demonstrating the size of the organ or of its changes during the progress of treatment with a view to its reduction after enlargement. An ingenious instrument has, however, been devised by a French surgeon, M. Mellez, for overcoming these difficulties, the name applied to it being the Pantograph. By its aid tracings can be obtained of the changes in the prostate as well as a record of dimensions, and possibly enough it may be found a most useful auxiliary in practice.

HOW THE POOR IN LONDON LIVE.—Out of two thousand two hundred and ninety persons living in consecutive houses at Bow-common, only eighty-eight adults and forty-seven children attend any place of worship; while in one street, near Leicester Square, containing two hundred and forty-six families, only twelve are said to be represented in church or chapel. The condition of some of their homes is said to be "pestilential." To get into them you have to visit courts which the sun never penetrates, which are never visited by a breath of fresh air, and which never know the virtues of a drop of cleansing water. In one cellar was found a father, mother, three children, and four pigs. In another room was a man ill with small pox, his wife just recovering from her eighth confinement, and the children running about half naked and covered with dirt. In an underground kitchen seven persons were found living, and a little child lying dead in the same room; while another apartment contained father, mother, and six children, two of them being ill with scarlet fever. Immorality is but the natural outcome of conditions like the above. The poverty of many who strive to live honestly is described as appalling. In St. George's-in-the-east, large numbers of women and children, some of the latter being only seven years of age, were employed in sack-making, for which they got a farthing each, while in one house a widow and her half-idiot daughter were found making palliasses at 1¾*d.* each. Another woman, who has a sick husband and child, was found employed at shirt-finishing, at 3*d.* a dozen, and by the utmost effort can only make 6*d.* a day, out of which she has to find her own thread.—*Echo.*

IMPURE WATER.—The use of impure water for drinking purposes has been fully recognized as a fruitful source of disease in humankind. (Lancet.) But much careless-

ness has been shown as to the necessity of providing cattle with pure water. This is a point to which the loss and inconvenience arising from the prevailing cattle epidemic may perhaps direct deserved attention.

SCIENCE AT THE CHURCH CONGRESS.—Prof. Flower's paper on "Recent Advances in Natural Science" was of great value, not only for its intrinsic excellence, but for the expression of opinion it elicited. (Lancet.) The remark that "there is no position so fraught with danger to religion as that which binds it up essentially with this or that scientific doctrine, with which it must either stand or fall," is pregnant with good sense. Prof. Flower spoke out boldly, and proved a worthy henchman of science. He might, however, have gone further than he did, and affirmed that by the discovery and formulation of the doctrine of evolutionary development, Darwin, unwittingly perhaps, has done more for religion than any theologian ever did. He has supplied the key to the great enigmas of original and inherited sin or sinfulness, the visiting of present transgressions on generations as yet unborn, and shown how, by the principle of development through and by the influence of the environment—as in the calling into existence of new species—there is produced the strongest scientific evidence of the existence of a soul and of a future. Man is unquestionably the subject of a self-consciousness, which, according to the doctrine of development as expounded by Darwin, could have no existence if it had not been called up within him by the constructive and developmental influence of those very realities whose existence the *unscientific* atheist denies. If theologians are wise, they will stand aside a while, and wait the issue of further progress in science, confident that Truth is *one* and must prevail.

THE DINNER OF LONDON CLERKS.—We see a tendency to make much of fish and of vegetables, and to minimize the daily meat allowance, or even to exclude it as being more costly and now strictly necessary; but it must not be forgotten that a considerably larger share of the former than of the latter is needful for substantial feeding, so that the cost is equalized, or even turned against the lighter fare. There is now much talk of brain foods, and no doubt certain materials do nourish the nervous system more than others; but, notwithstanding, the brain-worker is not a brain; he has also a body to maintain in vigor, and, without at all denying the necessity for brain feeding, we do not believe that a *perfectly nourished brain is to be found in a body whose bone and muscle are underfed.* There are similar tissues in both, and for each that food is best which contains a due admixture of all the nutritive elements. A fish or vegetable dinner once a week or so is an agreeable and beneficial change of diet; but the total daily ration of meat should not, as a rule, be less than half a pound, or, indeed, for most men less than three quarters. As to drink, we are not of those who think a stimulant by any means always necessary. For some who are up in years, or out of tone it is so, and such are usually fortified by a medical opinion to that effect; but the young and strong are healthier and clearer-headed when they practice abstinence and imbibe no stronger fluid than pure water. We must not omit to note how important it is that, whatever constitutes a dinner should not only be of fair quality, but also thoroughly well cooked, otherwise the digestive power will probaby prove unequal to the demand upon it.—*Lancet.*

ADVICE TO STUDENTS.—Scientific acquirement is the result of patient industry and careful self-education, not of controversy. Religion is the fruit of self-mastery and reverence, not of doubt and of wavering.—*Professor Acland.*

Train your senses, your understanding, and your reason, and have all your faculties under the governance of a resolute and vigorous will.—*Prof. Tweedy.*

Happy indeed is that man whose mind, whose moral nature, and whose spiritual being are all harmoniously engaged in the daily business of his life.—*Dr. Latham.*

THE London Lancet has been in existence sixty years. It was first issued on October 5, 1823, as a little double sheet, to-day's impression consists of ninety-six pages. The first article in the Lancet was an introductory lecture to students at St. Thomas's, by Sir Astley Cooper. The editorship, which has but once changed hands at the death of the Lancet's founder, twenty-two years ago, devolved on his son, Dr. Wakley, the present editor.

THE suicide of an anti-vaccinator is recorded in the London Medical Press. It is to be hoped that this is the beginning of a widespread epidemic among these misleading cranks.

THE PREVENTION OF HORSE ACCIDENTS. Mr. C. C. Baird, of the Dick Veterinary College, Edinburgh, has invented an india-rubber frog-pad for fitting into the heels of the shoes of horses, with the view of preventing the animals from slipping and falling on the causeway. The invention is exceeding simple, and will be of great value to medical men and others who drive horses, especially on asphalt and in frosty weather. The pad can be removed in the evening and replaced in the morning. A set of pads, it may be added, is expected to wear out two sets of shoes. The trial of the invention, we believe, has fully borne out the statements of the inventor as to the merits of the apparatus.—*Medical Press.*

A leather pad, considered superior to the rubber article, is coming into use in Louisville.

ABLATION OF THE LUNGS.—Dr. Domenico Biondi publishes, in *Giornale Internay. delle Scienze Mediche*, some interesting experiments which he has made on this subject. (The Medical Press.) He abstracted the lungs of fifty-seven animals (dogs, cats, sheep, etc.), and of this number thirty recovered. The operations were as follows: Removal of the right lung, 23—recovered, 12; of the left, 34—recovered, 18; of the two upper lobes, 3—recovered, 3; of the median lobe of one lung, 1—recovered, 1; of the inferior lobe of one lung, 1—recovered, 1. The failures should be attributed principally to the absence of antiseptic precautions, and it is to be hoped that humanity will soon profit by this daring surgical operation.

SODA-WATER AS A FIRE EXTINGUISHER.—A druggist in Connecticut some months ago had a fire break out in one of the rooms adjoining the store, in which alcohol, turpentine, and similar goods in barrels and other large quantities were kept. (Pharmaceutical Record.) The fire had gained considerable headway, but remembering that he had a loose fountain charged with carbonic-acid water, he quickly seized it, and, rolling it to the entrance to the room, at once opened the faucet, and in very brief order the fire was extinguished. A clear head in an emergency is able to accomplish much thinking in a brief space of time.

COMMENCEMENT SERMONIZING.—"As to the nobility of your calling, a man may sell fish to the glory of God."—*Dr. Clifford Allbutt.*

RELIEF OF FETID SWEATING FEET BY SUBNITRATE OF BISMUTH.—M. Vieusse (*Gazette Hebdomadaire*) commends highly this drug in this local bromidrosis. The fetid sweat follows different forms of affections of the feet, sometimes the derm is naked and exposed from the maceration of the epidermis, and is the seat of severe pain. At others the skin does not seem altered at all, while the odor from the sweat is very marked. In either form friction, with subnitrate of bismuth, has succeeded, by being careful to rub it well between the toes. In most cases its daily use for fifteen days produces perfect relief. The epidermis becomes firmer, and loses its whitish appearance, is less wrinkled and adheres to the subjacent tissue, and the secretion diminishes.

SULPHATE OF ATROPIA IN CORYZA.—Dr. Gentilhomme, in *Union Méd.*: In several very bad cases, with abundant secretion, fever, and embarrassment of respiration, engendering in some true attacks of asthma, a pill containing half a milligram of the sulphate, given at the commencement of inflammatory period, has arrested the coryza. In cases of confirmed coryza the sulphate also gives relief, but its effect is less decided than when given at the commencement of the affection.

A GREAT LINIMENT.—The Quarterly Therapeutic Review says, methyl salicylate (oil of wintergreen) mixed with an equal quantity of olive oil or linimentum saponis, applied externally to inflamed joints affected by acute rheumatism, affords instant relief, and, having a pleasant odor, its use is very agreeable.

SEA-SIDE SANITARIUMS.—Reports have become current that many of the extensive caravansaries along the sea-side used as resorts for invalids have become danger ous to health in consequence of defective drainage. Atlantic City, Cape May, Coney Island, Newport, and Martha's Vineyard are complained of.

THE Pope has forbidden the faculty and students of Victoria College of Montreal to enter the Hospital Hotel Dieu, and has turned them over to the Laval University. The first of these schools is Protestant and the second Catholic. The priests are also instructed to notify their flocks that the Catholic youth who attend the Victoria College are liable to excommunication.

THE KENTUCKY BOARD OF HEALTH'S FIFTH ANNUAL REPORT, 1883.—The chief practical work of the Board has been devoted to the restriction and arrest of infectious and contagious diseases.

Another subject of importance, which the Board has diligently urged, is *sanitary drainage.* Causes of Typhoid Fever, by Dr. Pinckney Thompson, President of the Board, is a paper of unusual value to all who would comprehend the relations of filth to that disease. After reviewing the most generally received views on the subject at the present day, in the face of his own extensive observations, he avows his belief in the most unequivocal words: "That this fever can be developed every day by decaying vegetable matter—especially when associated with that of fecal matter, I have not the slightest doubt." Altogether, considering the adverse circumstances, due to defects in the law under which this Board is organized, and the unjust criticism to which it has been subjected, the report is one of eminent satisfaction, exhibiting much excellent sanitary work, and full of practical suggestions for the future.—*Sanitarian.*

THE second annual convention of the United States Bottlers' Protective Association, and the second annual International Exhibition of Bottlers' Supplies, Machinery, Materials, etc., has been postponed from November 20, to December 11, 12, 13, and 14, 1883, and from Irving Hall to American Institute Hall, New York City.

CEREBRAL SOFTENING. — Dr. Ferguson presented to the New York Pathological Society, October 10, 1883, a brain, the seat of extensive softening in the right hemisphere, removed from a woman, sixty-five years of age, who had suddenly developed paralysis of the left side of the body, with difficulty in speech, after an extensive burn upon the chest, arms, and legs, from boiling water. The temperature, pulse, and respiration rose, and she died some hours after the injury. She was said never to have been sick before. The left ventricle was found hypertrophied and moderately dilated; the kidneys, the seat of extensive diffuse nephritis. The right side of the brain was extensively softened, especially in the parietal region; the ventricles dilated. The left hemisphere was normal. The tongue had also deviated to the left. Notwithstanding the extent of the kidney-lesion and the presence of numerous hyaline, granular, and fatty casts in the tubules, examination of the urine had proved entirely negative. There was no sign of embolism, thrombosis, or of hemorrhage, except very slight in the ganglia. The case had occurred too recently to admit of careful microscopic examination.

THE St. Louis Medical and Surgical Journal has strengthened its able editorial corps by the addition of Drs. John B. Keber, H. Christopher, A. E. Prince, Wm. C. Byrd, LeGrand Atwood. Dr. Thos. F. Rumbold continues editor in chief and proprietor.

HIPPOCRATES used few medicines; Sydenham said that he could carry all the medicine he needed in the head of his cane; Boerhave, said the enlightened physician could practice medicine with opium, cinchona, tartar emetic, wine, and water.

SOOTHED TO DEATH.—On the night of September 5th, a two-months-old infant, living in Washington Street, Brooklyn, being restless, was given a teaspoonful of "Mrs. Winslow's Soothing Syrup," by which it was killed. No report of who was found guilty of the murder.

MIXED BLOOD.—It was Defoe who, alluding to our mixed origin, in his "True-born Englishman," says ironically:

"With easy pains you may distinguish
Your Roman, Saxon, Danish, Norman-English."

A CASE of aneurism of the aorta, in which no physical signs were present except dyspnea, resulting in death, is reported in the Medical Press, by Chas. H. Wade, B. A.

A CASE of malarial fever in which a chill is replaced by a convulsion, is reported by Dr. H. J. Berkley, of Baltimore, in the Maryland Medical Journal.

A French physician expelled from one of his patients eleven complete tapeworms, by means of an infusion of pomegranate root, followed by castor oil.

A CASE of suppression of urine for eighteen days, ending fatally, is reported in The Medical Press.

COMTE'S definition of a science: That knowledge which enables us to foresee and foretell results.

The Louisville Medical News.

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THE HYDROCHLORIC ACID OF GASTRIC DIGESTION.

The New York Medical Journal, of October 13th, devotes a leading article to the absence of hydrochloric acid from the gastric secretion during certain morbid conditions, giving the opinions and investigations of several German writers (as set forth by Dr. E. Voght, *Progrès Médical*), who regard the non-secretion of the acid as a symptom of great significance in several well-known diseases.

This peculiarity has been observed in a few acute systemic affections, but it would seem to be especially marked in certain structural diseases of the stomach, such as carcinoma and amyloid degeneration.

Von der Velden found, in a case of typhoid fever, that the acid was absent during the whole course of the disease, re-appearing during convalescence; and Sassesky observed, in nine febrile patients, that it disappeared whenever the fever was characterized by indigestion. In structural affections, von der Velden found that while in cases of simple dilatation of the stomach the acid was never absent, no trace of it could be detected when the organ was carcinomatous.

Eight cases of the latter affection were studied with reference to this one symptom by this observer, and so constant was the relation between the failure of the secretion and the structural lesion, that in one case he ventured a diagnosis of cancer of the stomach on the absence of the acid alone, there being no other sign of the disease. The post-mortem confirmed this diagnosis. In another case, where all the symptoms pointed to a cancerous state of the stomach, he denied its existence on finding the acid present, and the subsequent history of this case also proved the correctness of his opinion. In cases of cancer of the liver, the stomach not being involved, the acid has been found to be invariably present.

In trying to account for the absence of the acid in these cases, it was shown that the condition could not be due to debility or cachexia, since the acid failed to re-appear even during a period of marked improvement in the patient; while it had been especially observed that, in non-cancerous patients who were marasmic to the last degree, the acid was a constant constituent of the gastric juice. Chemical action of the cancer juice in neutralizing the acid could not be said to account for its absence, for in all of the eight cases reported the disease was non-ulcerated scirrhus.

The above is negative evidence.

The only positive opinion given is by Edinger, who, having observed the absence of the acid in two cases of amyloid degeneration of the gastric mucous membrane, attributes the fact to endarteriïtis obliterans involving the arterioles of this membrane.

The methods of obtaining the gastric juice are simple, and the manner of testing for the acid easy. Von der Velden uses a Kussmaul's pump; but Edinger has, acting on an idea of Réaumur's, devised an ingenious substitute for the pump, and one so easy of application that it will doubtless greatly facilitate further researches. A little piece of sponge with a thread tied to it is placed in a gelatin capsule, which is swallowed by the patient; after a half hour the sponge is withdrawn, the capsule having dissolved, and the juice pressed out and tested.

The reagent employed by these observers in testing for the acid is tropeoline, a yellow substance which turns red under the action of a mineral but not a vegetable acid. It is claimed by von der Velden that, when pure, tropeoline acts readily in the presence of organic matters. Uffelmann, in a series of experiments performed on a person with gastric fistula, found that methyl violet served his purpose well as a test for the acid. But it would seem that this reagent is open to some objections, while in the hands of all the experimenters except Ewald, who it is believed used an impure specimen of the drug, tropeoline has given uniformly good results.

These novel investigations attest the growing importance of physiology in clinical study, and bid fair to clear up not a few obscure questions in the diagnosis of gastric derangements.

Correspondence.

PARIS LETTER.

[FROM OUR SPECIAL CORRESPONDENT.]

The subject of malaria is occupying a great deal of the attention of the profession, particularly on your side of the Atlantic, and the pathogeny of many diseases hitherto so obscure is now traced to the deleterious influence of that most deadly poison. By almost universal consent malaria is the cause of all types of intermittent and remittent fevers known; and if it be true that the poison "is generated in soils, the energies of which are not expended in the growth and sustenance of healthy vegetation," then the remedy against this state of things, would seem to be clearly indicated. As a practical illustration of the probable correctness of this theory, I may refer to some observations made by a French naval physician at Tonquin as bearing on the subject, though at first sight it would appear to be in contradiction with the generally accepted theory. According to this author, the delta of Tonquin may be compared to an immense marsh; but yet malarious fevers are comparatively rare in that country, which fact is attributed indirectly to the culture of rice, its principal produce. The harvest is gathered in twice a year, and it is to the expenditure of the energies of the soil and the enormous consumption of the gases and liquid that escape that is due the almost entire absence of malaria in the delta of Tonquin.

In connection with this subject I may here transcribe the following extract from the very interesting professional address delivered by Dr. W. G. King to the students, at the anniversary meeting of the Madras Medical College, at the end of June last:

"I would direct your attention to the heavy mortality which attends the presence of malaria in this country. From the year 1868 to 1877, two million two hundred and ninety-three thousand seven hundred and sixteen deaths occurred in this presidency (Madras) from fevers supposed to be chiefly of a malaria type. Of course, on account of defective registration and the absence of medical knowledge among those concerned in certifying the cause of death, much of this mortality may have ensued from diseases other than malarious attended by fever; still, undoubtedly, the greater amount is due to this cause. Now, if it be admitted that loss to the national wealth occurs from sickness during smallpox, still more is this true of malarial fevers; for here not only is labor frequently checked for prolonged periods during more severe attacks, but is spasmodically interrupted at intervals at a period when labor and exertion may be most valuable. Hence, as a sequel of the combined effects of poverty and sickness, you will in malarious localities constantly find a weakly, apathetic, badly nourished, and decreasing population, yet the gradual improvement in drainage which has been effected in England has caused almost total disappearance of this disease. The French have demonstrated the efficacy of similiar undertakings in Algiers; and in more remote times the Romans obtained equally happy results by means of their wonderfully complete subsoil drainage works, which have been lately brought to notice. Malarious fever may therefore be fairly regarded by the sanitarian as preventable. I do not anticipate you will be called upon to project complicated drainage schemes for the purpose of ameliorating malaria; but you will fulfill no small function if you use your influence in showing to ryots and villagers the dangers they undergo in not providing for proper removal of water that has been utilized for cultivation. Frequently the most useful improvements as to surface and subsoil drainage may be effected at a

most trifling expenditure and trouble by getting rid of unnecessary obstacles to outflow If the ryot will not do this in obedience to what he may consider your 'new fangled' theories as to health, he may be open to conviction that a water-logged soil can not benefit his crops; if, then, he will not act for the good of the community, he may at least be stirred by regard for his own pocket. Equally easy would it be for you in your unostentatious fight against this deadly poison to do much by advocating the planting of trees, and thus aim at desirable modifications of soil, climate, and water distribution."

The question has been often asked whether quinine given internally could produce abortion. According to Dr. Otto Mouson, quinine is not only not an oxytocic, but it may be a means of preventing abortion. At the commencement of his practice, about forty years since, Dr. Mouson prescribed this remedy with great hesitation to pregnant women affected with malarial poisoning. But he has since altered his practice; supposing that abortion may be caused by attacks of intermittent fever, he administered quinine to his patients without any apprehension of producing premature expulsion of the fetus. This opinion is not quite in accordance with the experience of other observers. The oxytocic properties of the sulphate of quinine have long been known, even among the laity, for up to this day and for many years past this drug has been used among the peasants in this country to produce abortion, and travelers in the East well know that the Chinese women resort to it for the same purpose.

If "La belle France" is not a land flowing with milk and honey, it certainly does with mineral waters, for according to a report published by the minister of public works, he gives a list of the mineral springs resorted to in France, of which there are no less than one thousand and twenty-seven. Of these, there are three hundred and eighteen sulphurous springs, three hundred and fifty-seven alkaline, one hundred and thirty-six ferruginous or chalybeate, and two hundred and fifteen saline.

The French league against vivisection held its first meeting about a fortnight ago, when all the speakers took the opportunity of denouncing to the public the horrors of vivisection and its inutility for the advancement of science. They demonstrated their themes by projections with the electric light, taking for their subjects plates from different works on physiology, and of course selecting those that would most likely excite the sympathy and wrath of the audience.

Through the initiative of the King of Italy an invitation has been forwarded to the different governments to send their representatives to an International Sanitary Congress, to be held in Rome in the month of November, with the view of organizing in Egypt an international service destined to protect Europe against the invasion of Indian cholera now and forever.

PARIS, FRANCE, October 5, 1883.

LONDON LETTER.

As you see, I am now in the great city of London. I have visited some of the chief hospitals, and seen a good many operations of interest. I went to Sir William MacCormac's residence soon after my arrival, but found he had gone to America, and probably he has visited you before this time. But I was directed to Mr. McKellar, who does his practice now; sent in my card and your letter to Sir William, and very soon found myself in the presence of a very kind gentleman, who gave me cards of introduction to the leading men in this city.

The first hospital I visited was King's College Hospital, going through the wards with Mr. Henry Smith, for Mr. Lister was still abroad in Buda Pesth, where he received quite an ovation. Now he has returned, and I will see him operate to-morrow. There was not a great deal of interest this day except a resection of the knee-joint for destructive disease. It was performed under the carbolic spray, for every thing is here on the antiseptic plan, and results are certainly very favorable—an antiseptic wound does not suppurate, and gives the patient a shorter time for recovery.

The next day I went to St. Bartholomew, and had here the pleasure of being introduced to Mr. Savory, and saw him perform an amputation of the thigh—lower third—for destructive disease of the knee-joint. This operation was performed without the carbolic spray, for the gentlemen in this hospital are opposed to "Listerism," and Mr. Savory has been one of his strongest opponents, and claims equally good results without it. The preferred method in amputation is the flap, after Teale, integumental and rectangular. The principal novelty I saw was a new tourniquet, which looked somewhat like a truss, with a broad, flat plate behind, well padded, and an oval piece in front

to compress the femoral artery; both are connected by a steel band and can be screwed tightly. For ligatures, they use now carbolized catgut altogether, which I think is quite a step in the right direction, as by its absorption it allows the flaps sooner to unite, and the surgeon is not bothered with having the ligatures outside of the wound to pull on and examine, ascertaining if they are detached in three or four days. They claim they hold perfectly—don't slip—and give no occasion to secondary hemorrhage. For sutures, silver wire is used of a tolerably small size, which can be twisted or tied as the surgeon desires. In every wound a seton of carbolized lint or drainage tube of rubber is left; and the stump is covered with layers of lint, dressed in carbolized lint and a flannel roller bandage, and not removed until the second or third day, as we commonly do.

The next case was an amputation of the left mamma for carcinoma. The cancer, of the scirrhus variety, had been in existence for a good many years, and the involvement of an axillary gland made it quite difficult. However, there was not much hemorrhage, arteries were twisted or tried with catgut as the case demanded, and the gland enucleated. The wound was closed with deep and superficial silver wire sutures. Only three deep sutures were required, and I would mention here that the wire was carried through a tin plate, then fastened with a piece of lead which was flattened like the seal on many of our mail-bags in America.

The next was an operation for strangulated hernia, by Mr. Willett, performed in the ordinary way.

But yesterday I was invited by Mr. Knowsley Thornton to the Samaritan Hospital to witness an ovariotomy; and as this was a little different from customary ones and very skillfully done, permit me to relate it: The patient was operated upon in her own room, under the carbolic spray; anesthetic was bichloride of methylene; her feet and hands were tied with leather straps, so no motion was possible. The abdomen exposed was covered with a fine oil-cloth, which had an oval opening and was fitted close. An incision three or four inches long was made in the median line, beginning about half an inch below the umbilicus. The dissection took place very carefully; the sponges saturated in carbolized water wiped up all blood, every bleeding vessel was secured by ligatures, hair or silk, or twisted with the forceps, being left in position till required changes in the arterial wall took place. Layer for layer was dissected until the peritoneum was reached. The tumor was now exposed, and a large trocar as used by Sir Spencer Wells thrust deep into the cyst, and the contents thoroughly drained by sufficient pressure upon it. In a very short time it was emptied, the hand now introduced, and the whole sac pulled through the opening until its pedicle was in the opening. A large flat sponge, nearly dry, was carried into the cavity to soak up any serum or blood that might remain in the abdominal cavity, and changed quite often. All the ovarian arteries in the cyst were now tied by silk ligatures, an aneurism needle threaded with carbolized silk carried below them and cut off very short, the cystic sac cut off with scissors, and the stump returned into the cavity. The wound was now completely closed with carbolized silk sutures, still under the spray, every layer carefully taken up by the needle, thick layers of gauze spread over it, fastened by broad adhesive strips, one covering half of the other one, and a flannel belt lined with cotton flannel fastened over the abdomen, secured tightly with safety-pins. Now the main point I wish to call attention to is the abolishment of the clamp, the ligation of the vessels with silk, returning of the stump into the cavity, and the complete and perfect closing of the wound by sutures, adhesive strips, and bandage. This dressing is not removed before the eighth or ninth day, and, as experience has proved, the wound completely closed without the least sign of pus, the silk not having produced irritation even.

Whatever may be said against the carbolic spray, one thing is certain in ovariotomy, it has given the most satisfactory results, with much less danger to the patient, and the wound looks much cleaner and nicer than it would with the production of pus; besides it saves the patient and surgeon the trouble of frequent changes in the dressing. Mr. Knowsley Thornton showed me a beautiful illustration of this fact as he took me to a patient's room, on whom he had performed ovariotomy a week ago, the case having been a rather difficult one as the tumor adhered firmly to the cecum. Notwithstanding this the patient was in excellent condition. From the record of the case after the operation I saw that there had been but once a rise of the temperature to 100° in the vagina, here it having always been a little higher than any where else, and remained 99°, or a little less. The dressing was now

carefully removed, and the stitches drawn. There was not a sign of pus, the silk was exactly as when it had been put in, and the wound beautifully closed. Only a slight circumscribed tympanitic sound in the left iliac fossa could be heard. A new dressing was applied as before, and a fresh abdominal bandage put over it.

Only a few years ago surgeons considered ovariotomy a capital operation, in fact the greatest operation performed on the human being; now it is done here almost every day; yes, twice to-day in this hospital by the same man; and so simplified has it become, that it woutd seem as if it might be done with an ordinary pocket-knife. But I close for to-day. You shall hear from me again.

E. von Quast, M. D.

Formulary.

A Formula for Irregular Heart Action.—Dr. Bowditch highly praises the following:

℞ Pulv. digitalis, ... gr. x;
Pulv. colchici sem., ... gr. xx;
Sodii bicarbonatis, ... gr. xxx.
M. et div. in pil. No. 20.

These are to be taken three or four times daily at first; subsequently to be reduced until only one is taken at bedtime; the treatment to be continued for from three to nine months.

He has used it for twenty-five years, and has found it to relieve even the most serious cardiac affections.—*Boston Medical and Surgical Journal.*

A Pleasant Quinine Mixture.—Dr. J. A. Taylor, of Gridley, Ill., writes to the Medical and Surgical Reporter: The following is my prescription for a child three to five years old:

℞ Quiniae sul., ... gr. xij;
Acid, tannic, ... gr. vj;
Sodii bicarbonat., ... gr. x.
Mix.
Syr. simplicis, q. s. . . . . ad. ℥ij;
Ol gaultheriae, ... gtts. iij.

M. Sig: Teaspoonful every four hours, followed by a draught of water. Shake well before giving.

To this may be added, when desired, bismuth sub. carb., ipecac., opium, podophyllin, leptandrin, etc., any thing that does not contain alcohol, which would immediately restore the bitter taste. The formula for any strength mixture is, twice the number of grains of quinia or cinchonidia to tannic acid, and three fourths as many of sodium bicarbonate.

A simpler mixture, devoid of bitterness when swallowed, is subjoined. All quinine mixtures are followed sooner or later after ingestion by a bitter taste:

Sulph. quin., ... ℥i;
Tannic acid, ... gr. xv;
Syrup of tolu, ... ℥iii.

Triturate thoroughly the quinine and tannin together, gradually adding the syrup. L. P. Y.

Selections.

Intestinal Worms.—During the last few years we have frequently referred to discoveries in human helminthology, both as regards parasites and pseudo-parasites. (British Medical Journal.) In 1882, Leuckart, of Leipzig, made some interesting researches which threw much light on the development of *Distoma hepaticum;* while Braun, of Dorpat, has worked out the life-history of *Bothriocephalus latus.* Leuckart has also turned his attention to the development of a round-worm, originally described as the recognized cause of an endemic form of diarrhea in Cochin China, but since found in natives of Switzerland and Italy. In the feces of a patient in the Julius Hospital, Würzburg, who had resided for several years in Acheen and in Mexico, he found young specimens of a nematoid worm, termed *Anguillula stercoralis* by Bavay. Perroncito had discovered the same worm in the intestines of workmen who died during the boring of the St. Gothard tunnel, from the effects of another intestinal parasite, the *Ankylostomum duodenale.* Dr. Bugnion contributed, it will be remembered, a valuable paper on the St. Gothard epidemic to the British Medical Journal, in 1881 (vol. i. p. 382), where full references to Dr. Perroncito's work will be found. The *Anguillula* of Bavay has been placed by Perroncito in a new genus, *Pseudo-rhabditis*, on account of its resemblance to a non-parasitic, genus *Rhabditis.* By cultivation, Leuckart succeeded in rearing young specimens taken from the feces. In thirty hours they became sexually mature. The females laid eggs which hatched; the embryos, only measuring 0.22 millimeter at first, soon grew to the length of half a millimeter. They then cast their integument, and lost the form of a *Rhabditis*, becoming more

like young strongyli or filariæ, but differing from these in the character of the esophagus and tail. This fresh generation, artificially reared, did not reproduce its kind, but soon died out. Hence Leuckart concluded that it is necessary for this filaria-like form to live in the human intestine before it can attain sexual maturity. A similar peculiarity and alternation has been observed in *Rhabdonema nigrovenosa*, a worm allied to *Ascaris*, and infesting the lungs of frogs. Leuckart believes that his artificially-reared filaria-like offspring of *Pseudo-rhabditis* has been observed before, and not suspected, to be a form of *P. stercoralis*, but has been reckoned as a different species, *P. intestinalis*. This supposed second species has been recognized by Grassi, and placed in a new genus, *Strongyloides*. But this *P. intestinalis* is but the young of *P. stercoralis*, living in human feces containing its parent. Contamination of water from such feces causes the introduction of this miniature form into other human subjects, and once in the intestine it develops to the perfect *P. stercoralis*. Dr. Bugnion's article, to which we have above referred, describes how the *Ankylostomum* was introduced in a similar manner. Hence Perroncito found the two species in company. Professor Leuckart, whose researches on this subject are published in the proceedings of the *Königliche Sachsische Gesellschaft der Wissenschaften* for 1882, simplifies matters by abolishing the names *Rhabditis* (or *Pseudo-rhabditis*) *intestinalis* and *stercoralis*, and naming the species *Rhabdonema strongyloides*.

Extract of Jamaica Dogwood as a Hypnotic.—Dr. Otto Seifert, writes in the *Berliner Klin. Woch.* (No. 29) on *Piscidia erythina*, or Jamaica dogwood, which belongs to the order Leguminosæ: The dogwood is a native of the West Indies and of the dry mountainous districts of the Antilles, but occurs principally in Jamaica. Toward the end of the last century the rind of the root was used (in the form of a decoction) for its narcotic effects by the natives of America, and also employed as a poison for fish. Prof. Ott, of Philadelphia, has recently made some physiological experiments, chiefly on rabbits, with this drug. He finds that the extract of piscidia is a narcotic, not only for the higher but also for the lower animals; that it is a mydriatic; it increases the respiration, produces salivation and perspiration, reduces the action of the heart, and in large doses may cause general paralysis and death from asphyxia. The liquid extract of the rind of the root is recommend ed for cases of "spinal irritation," and for the treatment of chronic severe cough where opium can not be prescribed. Von Firth has found the extract of value in patients suffering from delirium tremens, even where other narcotics, such as chloral, bromide of potassium, and opium have failed. Seifert gave some to healthy individuals, and found that it was followed by marked soporific effects, and some dilatation of pupil; but no change was observed in the pulse or temperature, nor was there any salivation or increase of perspiration. Severe coughing at night in cases of phthisis was greatly relieved by the administration of .25 of a gram of the solid extract.

Menstruation after Extirpation of the Ovaries.—Dr. Henry F. Campbell read a paper with this title, before the American Gynecological Society. While conceding the preponderating influence of the ovaries in the menstrual function, he was inclined to think that there was a nervous mechanism, probably centering in the lumbar enlargement of the spinal cord, by the action of which, quite apart from "habit," periodical hemorrhages from the uterus might be brought about that were wholly indistinguishable from ordinary menstruation. The speaker traced interesting analogies from the effects of the forced lactation in re-establishing the menstrual function and in overcoming sterility.

Dr. William Goodell, of Philadelphia, had found menstruation after removal of the ovaries very uncommon, but was quite ready to coincide with Dr. Campbell as to its cause when it did take place, the irritation being that caused by the ligature. In saying that menstruation was uncommon under such circumstances, of course he did not include the false menstruation that always, accord ing to his experience, took place within a few days after the operation. When menstruation did return, it was owing, he thought, to the fact that some ovarian structure was left behind, and, on account of the occasional difficulty of removing all ovarian tissue by the vaginal method of oöphorectomy, he had given up that method of operating.

Dr. Emmet related a case of his own, in which menstruation had continued after complete removal of the ovaries.

Dr. T. Gaillard Thomas thought the connection of the ovarian function with menstruation could not be regarded as yet ac-

curately and minutely defined. In regard to Dr. Campbell's theory, he had no data. His impression was that menstruation after removal of the ovaries was exceptional. When it did take place, it was not true menstruation, but a metrostaxis, due to the habit of the uterus, and was not continued for a great length of time. He found the same results, in this respect, after Tait's operation as after Battey's. He related a case of supplementary ovary in a patient from whom he had removed the two other ovaries early in the summer, and concerning whose menstrual function subsequently he knew nothing. He was decidedly inclined to adhere to the old theory of ovulation as the cause of menstruation.

CAPONING CHICKENS.–The chicken should be about three months old, and kept without food for about thirty-six hours before the operation, which is best performed on an ordinary table, in a good light. Place the fowl on the table, on its left side, and tie one end of a string about three feet long to the wings, to secure them, having previously attached a weight to the other end of this string, which must be dropped over the end of the table, so that it will remain suspended; then take the legs of the fowl and attach another string and weight in the same manner, in order that the wings and legs may be secured for the operation, which is performed thus: Pick the feathers from the hip-bone over the last rib; take a sponge and wet the ribs and feathers around, so that they will be out of the way during the operation. Insert the knife about half an inch between the first and second ribs from the hip-bone, and cut downward and forward to the end of the ribs; then turn the knife and cut up near the backbone. Now put in the spreaders and regulate the tension by the India-rubber band to suit the size of the fowl. Open the ribs and cut through the middle membrane that covers the bowels. Take the forceps and grip the upper testicle, and turn the forceps over once, thereby separating the testicle from all its attachments except the spermatic cord; now pull the testicle out. Repeat the operation on the lower testicle. Be careful to remove the whole of the testicles. Also carefully avoid the large vein under the testicles, or the operation might terminate fatally. Now untie and let the bird go. The incision must not be sewn up. The fowl should not be allowed to roost for a few days. If carefully performed, the loss by the operation does not exceed three per cent. The practical result of this operation is to largely increase the weight of the fowl.—*Exchange.*

AN ORGANISM IN THE BLOOD OF YELLOW FEVER.—It is stated that a series of investigations into the origin of yellow fever has just been made by Dr. Domingas Frieze, a Brazilian physician. Dr. Frieze claims to have discovered that the blood of yellow fever patients contains a parasite which appears as a minute point, and in one form or another continues its existence after the death of the patient. As he considers this fact to be satisfactorily established, he recommends that the bodies of all those who succumb to the disease should be burnt. In further experimenting it was shown that the injection of a little of the tainted blood into the veins of a rabbit caused death in fifteen minutes. This, Dr. Frieze admits, might only seem like ordinary blood-poisoning, were it not for the fact that the blood of the dead rabbit was found to be filled with the peculiar organisms referred to. Moreover, a guinea-pig kept closely upon the earth taken from a yellow fever cemetery died in five days, and the same peculiarity also appeared in its blood; from which the experimenter argues that all such burying places are constantly liable to distribute the disease.—*Med. Times and Gaz.*

MEANS OF PROVOKING THE SECRETION OF MILK.—When the milk-secretion is slow in appearing in a lying-in woman, or when it ceases from mental or moral causes, it may be made to return by cataplasms or fomentations of castor leaves applied to the breast, or by suction of the nipple, or by means of electricity. The mammary gland is slightly compressed between two sponge electrodes, and a feeble current passed though the gland for ten or fifteen minutes. This may be done twice a day. After the first few electrizations, the breasts swell, the large veins appear on the gland, and the milk secretion is set up.—*L' Union Med.—Medical Progress.*

NEW VIEWS ON BRIGHT'S DISEASE.—At a recent meeting of the Académie de Médecine of Paris, Prof. Semmola, of Naples, communicated to the society the result of his latest experiments on Bright's disease, under which term he understands chronic parenchymatous nephritis only. (British Medical Journal.) The primary cause of

albuminuria in that disease is, according to some, a lesion of the kidneys themselves, while others explain it either by a pathological condition of the albumen in the blood, or by a combination of these two causes. Semmola's experiments go far to show that the lesion in the kidneys is a secondary process. He injected daily under the skin of dogs ten to seventy grams of white of egg; after four to five days, there were signs of a congestion of the kidneys, which led to hemorrhage when the dose of albumen was large. After seven to ten days, leucocytes were found in the urine, and the renal epithelium began to show signs of fatty degeneration. This, after a fortnight, was well marked; and about the twenty fourth day, there evidence also of an interstitial lesion of the kidneys. The introduction of albumen into the blood produces a peculiar dyscrasia, and the quantity of albumen eliminated by the urine is larger than that which has been injected; in the animals experimented upon the bile contained albumen, which is also the case in patients suffering from Bright's disease. As for the cause of the peculiar dyscrasia alluded to, Semmola thinks that it is an alteration of nutritive functions of the skin. He tried also the subcutaneous injection of blood-serum, yolk of egg, and milk; the first caused a slight albuminuria, but the last two had no effect.

SUB-PERITONEAL INJECTIONS OF ALBUMINATE OF IRON IN CHRONIC ANEMIA.—Prof. A. Vachetta, having noticed the results obtained with this preparation when administered in the ordinary way, has endeavored to ascertain whether the peritoneum would not absorb it better in larger quantities and more quickly than the mucous membrane of the stomach. From experiments on dogs he concludes that the effects of albuminate of iron are more readily obtained by subperitoneal administration than by any other method, and that no inconveniences result from this mode of administration.—*Ex.*

VARIATIONS OF THE CHLORIDES IN DISEASES.—Dr. Burot read a paper on this subject before the late meeting of the French Association for the Advancement of Science, in which he showed a rapid method for estimating the quantity of the chlorides (the common method with nitrate-of-silver solution). Instead of using the graduated burette, the precipitating glass, and pipette, Burot inserts a tube, the extremity of which is in the form of a bowl, holding one cubic centimeter of urine. The urine is decanted and a small quantity of a solution of chromate of potash is added. A burette graduated in tenths of a centimeter is used for decanting the solution of nitrate of silver. Each division corresponds to grs. xv of the chloride per liter. The end of the reaction is indicated by the coffee and milk color due to chromate of silver.

Burot's observations lead him to admit eleven grams of chlorides per liter as the normal, ten grams being chloride of sodium, and one chloride of potassium. This proportion will vary, however, with the elimination, and with the causes which increase or diminish the secretory activity of the kidneys. It also varies in different states of disease. Diminution of the chlorides is important in view of the practical deductions which may be drawn from it. In chronic diseases, diminution only indicates feebleness of the digestive powers, unless there exists some other means of elimination, as diarrhea, dropsy, etc.

In acute diseases, the diminution is proportional to the intensity of the disease, and disappearance of the chlorides announces the presence of serous effusions or inflammatory exudations.—*Gaz. Méd. de Paris.*

DR. HENRY TUCKER (Southern Med. Record) claims that the following is a specific for singultus: Moisten granulated sugar with good cider vinegar; give to an infant from a few grains to a teaspoonful. The effect is almost instantaneous, and the dose seldom needs to be repeated.

ARMY MEDICAL INTELLIGENCE.

OFFICIAL LIST of Changes of Stations and Duties of Officers of the Medical Department, U. S. A., from October 13, 1883, to October 20, 1883.

Bache, Dallas, Major and Surgeon, assigned to duty at Willet's Point, New York. (Par. 1, S.O. 238, A.G.O., October 18, 1883.) *Huntington, David L.*, Major and Surgeon, by direction of the President, will, until further orders, take charge of the office of the Surgeon General of the Army and perform the duties pertaining thereto. (Par. 3, S.O. 234, A.G.O., October 11, 1883.) *Sternberg, George M.*, Major and Surgeon, granted leave of absence for one month, to date from October 6, 1883, with permission to go beyond the limits of the Department, and to apply for extension of one month. (Par. 3, S.O. 134, Department of California, October 4, 1883.) *Taylor, Morse K.*, Major and Surgeon, assigned to duty at Fort Sill, I. T. (Par. 4, S.O. 210, Department of the Missouri, October 13, 1883.) *Heizmann, Charles L.*, Captain and Assistant Surgeon, granted leave of absence for six months, with permission to go beyond sea. (Par. 3, S.O. 235, A.G.O., October 15, 1883.)